The Effect of Communication Medium
on Mental Health Outcomes

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Abstract
This study examined which form of mental health treatment was considered to be most appealing if an individual is seeking help for a mental health related concern. Furthermore, it detected which communication media was perceived to make people feel the most comfortable, bring the most benefits to mental health, and was the easiest to access when it comes to mental health treatment. This study utilized a posttest-only experimental design to manipulate the different images of communication media that participants saw during the context of a hypothetical therapy session (face-to-face, group, or digital application). Following the experiment, differences amongst groups were compared. Results revealed that although utilizing mental health aid through a digital application is perceived to be the easiest to access, getting help from a professional one-on-one and in person is perceived to make individuals feel the most comfortable, improve one’s mental health state the most, and is the option that people are most likely to utilize. This suggests that there is a greater need for professionals to help people with mental health related issues in an individual setting and that more funding should therefore be allocated towards this method of treatment than towards other forms of aid, such as digital applications or group therapy.

Keywords: Mental health, counseling, technology, applications
The Effect of Communication Medium on Mental Health Outcomes

In today’s society, one in five adults in the United States experiences mental illnesses each year (NAMI, 2020). In particular, young adults and children are a prominent population that struggle with mental health issues and the number of individuals with conditions has generally increased over the past decade. According to Mental Health America, from 2012 to 2017, the number of Major Depressive Episode (MDE) cases per year rose from 8.66% to 13.01% for youths ages 12-17. Over two million youths now have MDE with serious impairment (Mental Health America, 2020). Despite this rise of mental health conditions among individuals, there is an unmet need for both youths and adults to receive mental health treatment as only 28.2% of youths with severe MDE receive some consistent form of care (Mental Health America, 2020). Additionally, over 10 million adults still report an unmet need for mental health care.

Given these issues, with an increased demand for individuals seeking help related to mental health, it is important to know which resources are most effective. There are a variety of ways to receive mental health treatment and some resources may be easier to access, be more beneficial, or make individuals feel more comfortable than other resources. It is important to determine which tool is most appealing to individuals if they are to seek mental health treatment so that further advancements can be made in regard to providing people with the particular form of help that they wish to receive. The goal of this research is to examine which form of mental health treatment is most appealing if an individual is seeking help for a mental health related concern.

Communication Medium
Given that people may have different preferences regarding how to best seek mental health resources, it is important to consider the communication medium that people may be able to utilize when seeking mental health advice. A communication medium is the method that an individual uses to get a message across to an audience (Nordquist, 2020). There are several different forms of communication media and this study utilized three different media options to access mental health assistance through: individual face-to-face interactions, group sessions, and electronic applications (app). An example of an individual face-to-face interaction would be if someone wanted to talk with a professional in a private setting without anybody else present. An instance of a group session is group therapy; a scenario in which multiple individuals gather to share mental health struggles and listen to what each person is going through. Finally, getting assistance virtually through an app would mean that the help seeker digitally conveys his or her struggles to a professional. The professional would then give advice back to the individual virtually. Individual face-to-face help, group therapy, and mental health assistance through an app are three different ways for individuals to seek help. One communication medium may benefit one person more than another. Additionally, one medium may be better for solving particular problems than another would.

**Comfort**

In examining the effect of communication media, several outcome variables may play a role in determining which is all around the most suitable resource. One such variable is comfort. It is reasonable to expect that the more comfortable a communication medium resource makes an individual feel while accessing it, the more effective the source would be. According to one study, significant barriers that prevented individuals from seeking help from counseling were
confidentiality and trust in regard to the source of help (Christensen, 2010). Furthermore, another study indicates that young people in particular were less likely to seek help if they had negative attitudes toward getting help or had poor experiences with sources of help in the past (Dane, 2007). These factors all contribute to people feeling uncomfortable, and thus may prevent them from seeking help. Therefore, some communication media may allow individuals to feel more comfortable than others.

**Beneficial to mental health**

A related variable that may be impacted by the communication medium is how beneficial the resource is anticipated to be for an individual’s mental health. It is logical to assume that an individual would be more open to getting help through a communication medium if he or she believed that it would improve his or her overall mental health state, and that they would be less inclined to try it if they did not think that it would help. Although separate approaches to treatment work differently for everyone, it is shown that getting aid on mental health makes recovery and wellness a reality for people living with mental health conditions (NAMI, 2020).

Professor Shedler, an associate professor of psychiatry at the University of Colorado School of Medicine and director of psychology at the Hospital Outpatient Psychiatry Service, believes that a primary reason why individuals shy away from getting help is because they are uninformed about all of the benefits that it can bring. He states that research regarding the advantages of treatment and the process of it should be more accessible for the public to become informed about (Barth, 2010). However, informed about the effectiveness of mental health treatment or not, certain communication media used to access mental health resources may be
perceived to be more helpful than others, and individuals are more likely to utilize a tool if they think it will benefit them over those that they do not feel will improve their current state.

**Ease of Access**

An additional variable that may play a factor in determining which communication medium is the best to utilize is how easy it is to access. This means that the medium presents few barriers when it comes to individuals utilizing it. A study by Christensen (2010) explains that an important reason why some individuals failed to get help when they wanted to was because of a lack of accessibility such as in cost, time, and transportation (Christensen, 2010). This is especially problematic in rural areas where the abundance of mental health professionals is scarce. If an individual does not live close to a mental health professional, he or she would have an incredibly tough time getting regular help unless it was accessed virtually.

Furthermore, even if one does live near a mental health professional, the shortage of therapists has made it increasingly difficult for individuals to get help from any professional, let alone an exceptionally helpful one (Levine, 2018). A 2017 report from the physician search firm Merritt Hawkins, mentions that, “the lack of psychiatrists is an escalating problem … of more severity than shortages confronted with in virtually any other specialty." Many people actively search for help but are unable to get it due to this shortage of workers, and this is problematic.

Additionally, having access to any mental health professional is oftentimes not enough; finding the right Professional to talk to is another challenge (Ferguson, 2017). Different Professionals specialize in separate areas of expertise. Moreover, there is no definite strategy that universally makes everyone feel better and different professionals have separate ways of going
about helping their clients. One mental health professional could be immensely helpful for one person and another individual may not improve at all.

On the topic of the cost barrier that may make getting help difficult to access, some improvements have been made. For instance, the Affordable Care Act has expanded its services with new plans and it considers mental health and substance abuse services to be essential health benefits (Blewett, 2013). Despite this advancement, challenges are still apparent since state Medicaid expansions are optional and several states have opted not to implement the expansions (Blewett, 2013). Given this, the financial burden that someone could experience while attempting to get help is a significant barrier that could prevent them from accessing treatment. It is clear that several issues regarding accessing mental health treatment are present. Some communication media however do not have as many barriers as others. The fewer accessibility obstacles there are, the more likely an individual is to utilize a resource.

Communication Theory

In examining the potential influence that communication media may have when it comes to perceived effectiveness of improving mental health, two communication theories may be useful to consider: (1) the Theory of Planned Behavior and (2) Social Information Processing Theory. First, according to Ajzen (1991), the Theory of Planned Behavior (TPB) explains why people do what they do and predicts how individuals will respond to a persuasive message. The key idea in TPB is that prior to every behavior, a behavioral intention exists. If this intention is high, the behavior is likely to be performed (Ajzen, 1991). There are two primary assumptions in TPB. The first assumption is that behavior is intentional and the second assumption is that individuals have known reasons for taking actions on intentions. Therefore, if someone can
comprehend intentions and reasons, he or she will be able to understand why an individual acts the way that they do and therefore be able to predict how they will react to persuasion (Ajzen, 1991). The Theory of Planned Behavior is useful for this study because it can be used to look at behavioral intentions related to getting mental health treatment. If an individual intends on utilizing a mental health resource through a particular medium, it would make sense to predict which communication medium is perceived to be the most favorable choice.

Another theory that is useful to apply in the context of examining different types of communication media is Social Information Processing Theory (SIPT; Walther, 1992). Ramirez (2017), explains that although computer-mediated communication has less nonverbal cues, it does not mean that it is inferior to face to face communication and that users can utilize strategies to overcome missing cues (Ramirez, 2017). SIPT has two main premises. The first is that face-to-face nonverbal cues can be translated into digital text-based cues. The second is that text-based cues require more time to read or write (Ramirez, 2017). The Social Information Processing Theory can be helpful in this study because it shows that although computer mediated communication is just as adequate as face-to-face communication in some settings, it might not be as sufficient in other settings, such as therapy. Therapy sessions are typically personal and serious discussions that heavily rely on nonverbal cues and empathy. Face-to-face communication settings in this case are superior to computer-mediated communication because they allow for more direct communication to take place which may reduce misunderstandings; something that is crucial when it comes to getting help.

Summary
The Theory of Planned Behavior and Social Information Processing Theory are both useful in helping researchers to predict behavioral intentions related to therapy and other sources of mental health help. Several factors such as accessibility, comfort, and perceived benefits to mental health contribute to which communication medium an individual is most likely to utilize. In summary, from the research previously stated that examines comfort, benefits to mental health, ease of access, and the communication theories, it may be possible to predict which communication medium individuals favor and why in-person treatment is superior to computer-mediated communication in this circumstance. Thus, the following four hypotheses are presented for empirical testing:

H1: Communication media influence a person's perceptions of ease of access such that they will perceive the app as the simplest to access.

H2: Communication media influence a person's perceptions of which is most effective, such that they will perceive the individual face-to-face medium as the most beneficial to mental health.

H3: Communication media influence a person's perceptions of comfortability such that they will perceive the individual face-to-face medium as the option that makes people feel most comfortable.

H4: Communication media influence a person's perceptions of which they are most likely to utilize, such that they will perceive the individual face-to-face medium as the option that they are most likely to use.

**Method**
This study utilized a posttest-only experimental design to manipulate the different images of communication media that participants saw during the context of a hypothetical therapy session (face-to-face, group, or digital application). The goal of this research is to examine which form of mental health treatment is most appealing to individuals if they were to seek help for a mental health related concern. Following the experiment, differences between groups were compared.

**Participants**

One hundred and twenty-nine volunteer participants were recruited from a large public California University (primarily Communication Studies courses). Some participants were given a minimal amount of course extra credit as an incentive for partaking in this study. Participants reported their gender as 10.9% males, 89.1% females with a mean age of 38.89 years ($SD = 16.99$). Additionally, participants that identified as students represented the following years in school: 6.2% first years, 9.3% second years, 8.5% third years, 19.4% fourth years, and 8.5% fifth or above. 48.1% of participants that took the questionnaire were not currently in school. For ethnicity, 83.7% identified as White, 7.8% as Asian, 3.1% as Hispanic/LatinX, 3.1% as multiracial, 1.6% as Middle-Eastern, and .8% preferred not to say.

**Procedures**

Participants were recruited using both volunteer and convenience sampling techniques. The questionnaire link was posted by individuals on the research team onto a variety of different student online group pages (such as Facebook community pages). Research team members also asked university professors to share the link with their students for extra credit. If the students decided to participate, respondents clicked the link and were guided to an online questionnaire
hosted by Qualtrics. The first thing presented on the questionnaire was a consent form that informed respondents that their participation was voluntary and confidential. Next, random assignment organized participants into one of three manipulated stimulus conditions in which participants were shown an individual therapy office, a group therapy room, or an app that displayed virtual mental health aid. Following the manipulation, participants completed outcome measures to convey how comfortable they would feel getting help through that medium, if they believed that communication medium would be beneficial for their mental health, how convenient that communication medium would be to access, and which communication medium they would prefer to receive treatment through. Next, participants completed a short induction check to see if they could correctly identify the communication medium that was presented in the manipulation. Finally, participants completed a measure of demographics.

**Stimulus Materials**

Participants were randomly assigned to view one of three possible therapy scenarios. Depending on the condition, participants either saw a therapy office to depict a one-on-one session \((n = 44)\), a group therapy setting \((n = 46)\), or an app that conveyed digital help \((n = 39)\).

In order to enhance the realism of the hypothetical scenario, all individuals were given the same prompt while viewing the image. This statement followed “imagine you were thinking about talking to a mental health professional regarding something that you’ve been struggling with lately.” The only difference between the three groups was that after that statement was given, the next sentence followed stated that hypothetically the individual decided to either meet for an individual or group therapy session at that location, or that they decided to download the app to speak virtually with a professional (see appendix A).
Measures

**Comfort.** In evaluating the perceived comfortability of each communication medium, this study adapted a five-item Likert scale ranging from 1-7 (strongly disagree to strongly agree). Statements included phrases such as, “I would feel comfortable opening up to people about my mental health in this setting” and “I trust that if I were to open up to people through this resource, my statements would be kept confidential” (see appendix B). The reliability for this scale was acceptable ($\alpha = .88, M = 4.30$).

**Benefits to Mental Health.** In evaluating the perceived comfortability of each communication medium, this study adapted a five-item Likert scale ranging from 1-7 (strongly disagree to strongly agree). Statements included phrases such as “this resource would likely improve my mental health state if I utilized it” and “other resources would help my mental health condition more than this one would” (see appendix B). The reliability for this scale was acceptable ($\alpha = .87, M = 4.18$).

**Ease of Access.** In evaluating the perceived ease of access for each communication medium, this study adapted a five-item Likert scale ranging from 1-7 (strongly disagree to strongly agree). Statements included phrases such as “there are barriers that prevent this resource from being simple to utilize” and “this service seems easy to access” (see appendix B). The reliability for this scale was acceptable ($\alpha = .81, M = 4.34$).

**Intention.** In evaluating the intention to use each service, this study adapted a two-item Likert scale ranging from 1-7 (strongly disagree to strongly agree). Statements included the example phrase: “I would likely utilize this mental health resource if I felt I needed it” (see appendix B). The reliability for this scale was acceptable ($\alpha = .74, M = 3.93$).
**Manipulation Check.** To assess the extent that participants paid attention to which communication medium was shown, a manipulation check measure was adapted for this study. This measure was composed of a question followed by three possible responses. The question read as: “in thinking back to the photo that you saw, what type of mental health resource do you think best describes the one pictured at the beginning of this study?” The answer possibilities were: “it was a one on one mental health session,” “it was a group mental health session,” and “it was a digital application mental health session” (see appendix B). The results of the manipulation check are featured in the results section.

**Results**

SPSS version 26.0 was used to analyze experimental data. Given the proposed hypotheses, statistical analyses were conducted to examine the influence that communication media may have when it comes to perceived effectiveness of improving mental health. Results and conclusions are subsequently discussed.

Prior to conducting analyses connected to the hypothesis tests, results from the induction check were analyzed to determine the extent that participants noticed which communication media image they were presented with. A chi-square test was used to examine how many participants correctly remembered which group they viewed. Results showed that out of 44 participants who saw the individual therapy session, 41 correctly recalled as such. Out of 46 participants who saw the group condition, 44 correctly recalled as such. Out of 39 participants who saw the digital condition, 22 correctly recalled as such. In addition, these differences were statistically significant $\chi^2(4, N = 129) = 153.37, p < .001$. Therefore, participants on average
correctly noticed the condition that they were assigned to and the manipulation was likely to some extent effective.

Hypothesis one tested whether communication media would influence a person's perceptions of ease of access such that they would perceive the app as the simplest to access. An ANOVA was conducted to examine differences between groups: findings indicate that participants that were shown the image of the digital application therapy session perceived this to be easier to access ($M = 4.97$, $SD = .906$) than the individual personal therapy ($M = 4.04$, $SD = .925$) and the group therapy session ($M = 4.10$, $SD = 1.04$). Differences were statistically significant overall $F(2, 126) = 11.82$ $p < .001$. In addition, a post hoc Tukey analysis was conducted to identify where specific differences between groups emerged. Overall, the digital application condition was perceived statistically significant in comparison to the individual condition ($p < .001$) and the group condition ($p < .001$). However, there was no significant difference between the individual condition and group condition ($p = .948$). Therefore the application condition caused greater perceptions of ease in access and hypothesis one was supported.

Hypothesis two predicted that communication media would influence a person's perceptions of which is most effective, such that they would perceive the individual face-to-face medium as the most beneficial to mental health. An ANOVA was conducted to examine differences between groups: findings indicate that participants said they felt the individual one-on-one therapy session would improve their mental health state the most ($M = 4.53$, $SD = 1.20$) as opposed to group therapy ($M = 3.94$, $SD = .978$) or help through a digital application ($M = 4.08$, $SD = .784$). Like prior results, the differences were statistically significant $F(2, 126) =$
4.16 \( p = .018 \). In addition, a post hoc Tukey analysis was conducted to identify where specific differences between groups emerged. Overall, the individual condition was perceived statistically significant in comparison to the group condition \( (p = .017) \). However, there was no significant difference between the individual condition and app condition \( (p = .111) \) or the app condition and the group condition \( (p = .793) \). Therefore the application condition overall contributed to greater perceptions of ease in access and hypothesis two was supported.

Hypothesis three predicted that communication media would influence a person's perceptions of comfortability such that they would perceive the individual face-to-face medium as the option that would make people feel most comfortable. An ANOVA was conducted to examine differences between groups: findings indicate that participants who were shown the photo to represent the individual, one-on-one therapy session said that they would feel more comfortable in that setting \( (M = 4.73, SD = 1.26) \) than in the group therapy session \( (M = 3.89, SD = 1.19) \) and through help via a digital application \( (M = 4.28, SD = 1.06) \). These differences were statistically significant \( F(2, 126) = 5.74, p = .004 \). In addition, a post hoc Tukey analysis was conducted to identify where specific differences between groups emerged. Overall, the individual condition was perceived statistically significant in comparison to the group condition \( (p = .003) \). However, there was no significant difference between the individual condition and app condition \( (p = .203) \) or the app condition and the group condition \( (p = .273) \). Therefore, overall hypothesis three was supported.

Finally, hypothesis four predicted that communication media would influence a person's perceptions of which they would be most likely to utilize, such that they would perceive the individual face-to-face medium as the option that they would be most likely to use. An ANOVA
was conducted to examine differences between groups: findings indicate that participants who
were shown the photo to represent the individual, one-on-one therapy session said that they had a
higher intent to use that resource \((M = 4.47, SD = 1.30)\) over the group therapy session \((M =
3.48, SD = 1.22)\) and the digital application \((M = 3.87, SD = 1.03)\). These differences were
statistically significant \(F(2, 126) = 7.75 = p < .001\). In addition, a post hoc Tukey analysis was
conducted to identify where specific differences between groups emerged. Overall, the
individual condition was perceived statistically significant in comparison to the group condition
\((p < .001)\). However, there was no significant difference between the individual condition and
app condition \((p = .065)\) or the app condition and the group condition \((p = .289)\).

**Discussion**

This study tested which communication medium that individuals would feel the most
desirable to utilize when it comes to helping with mental health related issues. The results of the
study indicate that help through a digital application is the easiest for people to access and that in
person one-on-one therapy is perceived to make people feel the most comfortable, be the most
beneficial, and is the option that people would most likely utilize if they were to seek help.
Overall, these results are not shocking.

Regarding accessibility, getting help through a digital application overcomes the barrier
that Christensen (2010) stated about how cost, time, and transportation are reasons why people
neglect to seek help. Apps are typically free or inexpensive, they do not require transportation,
and people can utilize them at the most convenient time for them, which is likely why they are
perceived to be the most accessible option.
With reference to the variable of comfortability, it is no surprise that individual, in person therapy is perceived to be the best option. Confidentiality is a factor that prevents people from feeling comfortable seeking help (Christensen, 2010), but talking to a professional privately in person would likely reduce this fear more so than a group therapy session or speaking with someone through a digital app would. In a group therapy session, individuals may worry that someone listening in the group would disclose their private feelings and information to others. Additionally, people who worry about internet privacy could very easily fear opening up to someone through a digital application. However, if someone were to speak to a professional individually and in person, these issues are no longer prevalent.

Finally, in relation to which communication media is perceived to be the most beneficial, it is reasonable to see why individual, in person therapy is considered to be the best option. Basing information off of the Social Information Processing Theory, which explains that although computer mediated communication is just as adequate as face-to-face communication in certain situations, it might not be the preferred tool in something like therapy, which relies heavily on nonverbal cues and empathy; something that is difficult to receive digitally. Thus, one would likely expect to receive the most clear nonverbal cues and direct advice through speaking with someone individually and in person, which is why one-on-one in person therapy is perceived to bring the most benefits to mental health.

Given this information, this study provides helpful insights for real world implications: there is a demand for therapists to help people in an individual setting and that more funding should be allocated towards this method of treatment than towards other forms of aid, such as digital applications or group therapy. However, digital applications are still a good option for
people who have limited accessibility to speaking with a professional in person due to reasons such as cost, transportation, or time. Because of this, further developments on digital applications that provide help for people who seek mental health treatment is also needed.

**Limitations**

It is important to acknowledge that this study was subject to two primary limitations. First, this study was demographically skewed. The majority of participants were female (89.1%), with few males participating (10.9%). This is problematic as males may differ from females in their perception of which communication media is most desirable to utilize, if any at all. Furthermore, the majority of participants (83.7%) were White, with scarce responses from participants of other races. This also may be a problem if racial or cultural norms lead people of different races to perceive mental health treatment differently.

Second, the images displaying the three different settings to receive mental health treatment through may have been confusing for some participants. The induction check question asked, “in thinking back to the photo that you saw, what type of mental health resource do you think best describes the one picture at the beginning of the study.” Three possible answers were given: “it was a one-on-one mental health session,” “it was a group mental health session,” and “it was a digital application mental health session.” Since the image of the digital application resource was individual, participants may have indicated that the image that they viewed was a one-on-one mental health session even though the correct answer would be that it was a digital application mental health setting. This confusion may have led them to answer the questions based off of the wrong communication media, which could have skewed results.

**Final Thoughts**
Many people that struggle with mental health issues desire to receive help. Therefore, knowing which resources related to mental health treatment are most effective and desirable amongst individuals is crucial. As shown in the study, a digital application is perceived to be the easiest way to access mental health resources through, while getting help from a professional one-on-one and in person is perceived to make individuals feel the most comfortable, improve one’s mental health state the most, and is the option that people are most likely to utilize. Given this, it would be wise for more funding to be allocated and towards this method of treatment than towards other forms of aid, such as digital applications or group therapy. If more individuals were able to receive treatment in the way that they feel is the most desirable, perhaps mental health conditions would decline and people would feel happier all-around.
References


Appendix A1

Manipulated Interview Question Response – Image of one-on-one mental health session

Please read the following instructions in detail. This is important. If you do not examine these materials closely, this study will not make sense to you.

Imagine you were thinking about talking to a mental health professional regarding something that you’ve been struggling with lately. You decide to meet for a one-on-one session at this location.
Appendix A2

Manipulated Interview Question Response – Image of group mental health session

Please read the following instructions in detail. This is important. If you do not examine these materials closely, this study will not make sense to you.

Imagine you were thinking about talking to a mental health professional regarding something that you’ve been struggling with lately. You decide to meet for a group therapy session at this location.
Appendix A3

Manipulated Interview Question Response – Image of digital application mental health session

Please read the following instructions in detail. This is important. If you do not examine these materials closely, this study will not make sense to you.

Imagine you were thinking about talking to a mental health professional regarding something that you’ve been struggling with lately. You decide to download this app to virtually speak with a Professional who could assist you.

Hi, I'm Kate! Welcome to Instant Digital Therapy. How are you today?

Hi, I'm doing alright, I guess. I've been feeling down lately and was hoping to talk to someone about it.

Glad you reached out. Do you want to tell me more about what's going on?

Thank you! And sure. Lately I haven't felt like myself. I haven't been finding joy in things that used to make me happy and have experienced insomnia along with a loss of appetite.

I'm sorry that you've been having a hard time lately. I have some suggestions about ways to cope. How long has this been going on for?
Appendix B:

Outcome Measures

Comfortability Measure: (1-7 Strongly Disagree to Strongly Agree)
1. I would feel comfortable opening up to people about my mental health in this setting.
2. I would feel more comfortable getting mental health assistance in a different way.
3. This resource would make me feel safe about expressing my mental health concerns.
4. I trust that if I were to open up to people through this resource, my statements would be kept confidential.
5. I would feel nervous about opening up to people through this resource.

Benefits to Mental Health Measure: (1-7 Strongly Disagree to Strongly Agree)
1. This mental health resource seems credible and would therefore help me.
2. This resource would likely improve my mental health state if I utilized it.
3. Getting help in this setting would be the most beneficial way to improve my mental health state.
4. Other resources would help my mental health condition more than this one would.
5. This resource would not improve my mental health state.

Ease of access Measure: (1-7 Strongly Disagree to Strongly Agree)
1. This service seems easy to access.
2. There are barriers that prevent this resource from being simple to utilize. Strongly
3. This resource seems complicated or intimidating.
4. If people were to seek help for their mental health conditions, this resource would be the easiest way to get assistance.
5. This resource would be easy for everyone to utilize.

Intention to use Measure: (1-7 Strongly Disagree to Strongly Agree)
1. I would likely utilize this mental health resource if I felt I needed it.
2. I would prefer to get another form of help if I was struggling with my mental health.

Communication Media Manipulation Check:
In thinking back to the photo that you saw, what type of mental health resource do you think best describes the one pictured at the beginning of this study?
1. It was a one-on-one mental health session
2. It was a group mental health session
3. It was a digital application mental health session